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April 7, 2024

Testimony in Opposition to:

LD 174: An Act to Restore Religious Exemptions to Immunization Requirements

LD 727: An Act to Repeal Certain Immunization Requirements for Schools

Senator Rafferty, Representative Murphy, and distinguished members of the Committee on Education and Cultural Affairs,

My name is Dr. Joe Anderson. I am a resident of Portland and a board-certified pediatrician practicing in Lewiston. I serve on the board of the Maine Chapter of the American Academy of Pediatrics, a membership organization representing 300 pediatricians and subspecialists across the state, all dedicated to protecting the health and lives of Maine's children and adolescents.

I am submitting testimony on behalf of the Maine AAP to express our **strong opposition to LD 477 and LD 727**. We respectfully urge you to vote **Ought Not to Pass** on these two bills.

Let us be very clear: weakening our vaccine protections will put Maine children in harm's way.

Vaccines are not just a personal health decision; they are a cornerstone of public health. They are the reason we no longer see classrooms emptied by measles outbreaks, children permanently harmed by polio, or infants dying from whooping cough at rates once considered routine. When we allow unvaccinated children into school settings without valid medical contraindications, we put everyone—especially our most vulnerable—at risk.

As pediatricians, we've seen firsthand the power of childhood immunization. We've also seen what happens when we let our guard down.

In 2019, Maine saw one of the lowest vaccination rates for kindergarteners in the country, and vaccine-preventable diseases were on the rise. That same year, the legislature acted decisively to protect children by ending non-medical exemptions—and the people of Maine overwhelmingly agreed. More than 70% of voters upheld this public health measure at the ballot box, sending a clear message: **Maine prioritizes science, safety, and the health of our children.**

Allowing non-medical exemptions—or eliminating vaccine requirements altogether—would not only invite the return of preventable diseases, it would also embolden misinformation about vaccine safety. Let's be honest: these efforts are not being driven by new scientific evidence—they're being fueled by a well-organized campaign of vaccine misinformation and mistrust. And parents, wanting to do what's best for their children, are vulnerable to this misinformation. As a result, confidence in vaccines has suffered.

Since ending non-medical exemptions to childhood vaccinations for school entry, and despite the ongoing flood of vaccine misinformation on social media and elsewhere, **Maine has seen a significant improvement in our kindergarten vaccination rates.** In fact, a recent report highlighted that Maine is one of only four states to have improved kindergarten measles vaccination rates since pre-pandemic levels. Most other states, as clearly illustrated in Figure 1, have seen declines in vaccination rates and have been more vulnerable to the effects of misinformation.

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We are already seeing the consequences in states that have not maintained strong vaccine protections. Texas is currently experiencing a significant measles outbreak, with nearly 500 reported cases and at least two deaths—almost all among unvaccinated individuals. And just recently, two infants in Louisiana tragically died from pertussis (whooping cough)—a disease that is preventable with routine childhood vaccinations. These devastating events are a sobering reminder of how quickly progress can be lost, and why vigilance in public health policy is essential.

As pediatricians, we've seen how quickly false claims about vaccines can spread online, often sounding scientific or trustworthy, but having no basis in actual research or clinical experience. We've all had conversations with anxious parents who've been misled by social media posts or viral videos that trade in fear rather than facts. We do our best to combat these confusing & frightening messages—but fear is a powerful force, and it can be difficult to overcome in the limited time we have with families. These bills would only serve to bolster the misinformation, conspiracy theories, and fringe ideologies that threaten the health of our communities.

Pediatricians are the most knowledgeable and trusted source for information about vaccines. But our experience over the past several years has clearly shown that **we cannot do this alone**. Public policy has an essential role to play in protecting our children from vaccine-preventable diseases.

We ask you to reject these proposals and continue to stand up for science, for children, and for the health of our communities. We owe it to every family—especially those with immunocompromised children—to maintain the strong vaccine policies that keep our schools safe. **Weakening these protections would be a reckless step backward.**

Thank you for your time and consideration. We would be happy to have a pediatrician available for the work session.

Sincerely,

A handwritten signature in black ink that reads "Joe Anderson DO".

Joe Anderson, DO, FAAP

Advocacy Chair, Maine Chapter of the American Academy of Pediatrics

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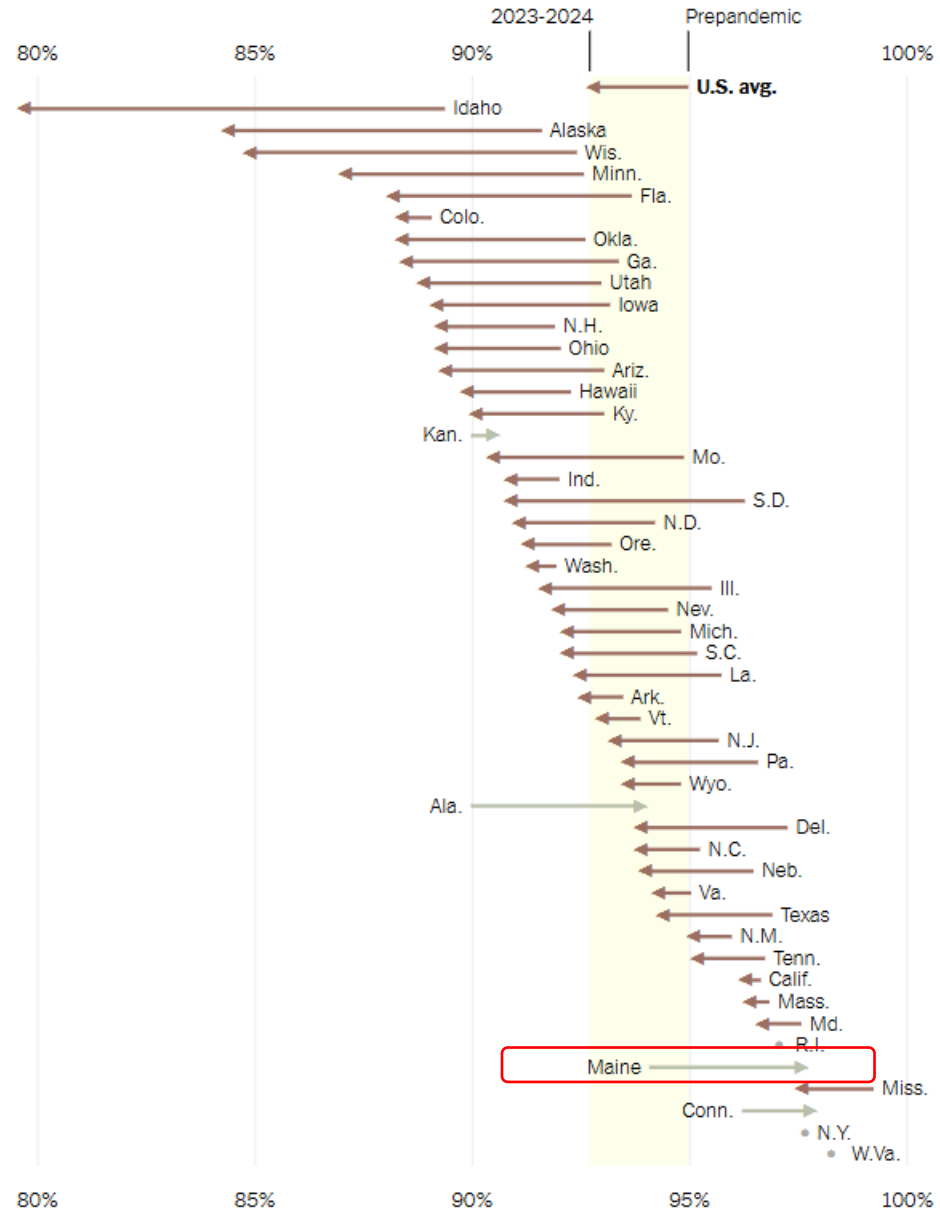
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Figure 1:

Change in kindergarten measles vaccination rates



Prepandemic is the average of 2017-18, 2018-19, and 2019-20 data, though not all years were available for all states. Alabama, Florida, Georgia, Iowa, Mississippi, New Hampshire, New Jersey, and Delaware (in 2024) report the rate of students who have completed all required vaccines, not just the measles series. Source: Centers for Disease Control and Prevention.

Paris, F. (2025, January 13). Childhood vaccination rates were falling even before the rise of R.F.K. Jr. *The New York Times*. <https://www.nytimes.com/interactive/2025/01/13/upshot/vaccination-rates.html>